

FJ-002-USA-P

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
H. Ishida, et al.

Serial No.: 10/811,952

Art Unit: To Be Assigned

Filed: March 30, 2004

Examiner: To Be Assigned

For: A Thermosetting Resin Composition And Its Article

PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. 1.136(a)

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

It is respectfully requested that an Extension of Time for the period indicated below be granted in accordance with the provisions of 37 C.F.R. 1.136(a) to take the action required in the above-identified application, as reflected by the papers submitted herewith.

	<u>Other than Small Entity</u>	<u>Small Entity</u>
First Month	___ \$120.00	___ \$60.00
Second Month	___ \$450.00	___ \$225.00
Third Month	___ \$1,020.00	___ \$510.00
Fourth Month	<u>  X  </u> \$1,590.00	

  X   The Commissioner is hereby authorized to charge \$ 1,590.00 to the credit card identified in the attached Credit Card Payment Form. This amount is believed to be correct; however, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 20-1424. A duplicate copy of this letter is attached.

03/16/2005 MBEYENE1 00000007 10811952

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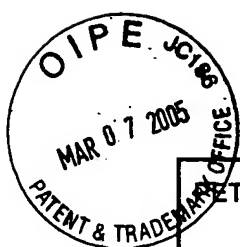
1590.00 DP

Respectfully submitted,

Donald E. Townsend

Reg. No. 22,069

Customer No. 27955  
Date: March 14, 2005  
TOWNSEND & BANTA  
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03-09-05

PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 3424																								
Application Number 09/911,856		Filed July 25, 2001																								
For <b>EXPRESSION MONITORING FOR GENE FUNCTION IDENTIFICATION</b>																										
Art Unit 1631	Examiner C. MAHATAN																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td>\$_____</td></tr><tr><td><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td><u>\$2160</u></td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed. 03/15/2005 DTESSEM1 00000060 010431 09911856</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. 01 FC:1255 2160.00 DA</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 01-0431. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>50,167</u>.</p> <p><u>Leticia R. Block</u> March 7, 2005 Signature Date <u>Leticia R. Block</u> 408-731-5000 Typed or printed name Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$_____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$_____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$_____	<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	<u>\$2160</u>
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<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	<u>\$2160</u>																							

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.